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	····		Substitute	for For	ETERMIN m PTO-875	Effec	N RECOI	RD ber 8, 20	204 .	1	Califor or D	ocket (	<b>Annow</b>
	APPL	ICATION	AS FILED						•			4	637
		· (Col	umn 1)		(Column 2)		SMA	ALL ENT	n Tv	OR	0	THE	NAHT F
FOR	THE REPORT OF THE PROPERTY OF		ERFILED	NUMBER EXTRA							SMALL EN		ENTIT
BASIC FEE (37 CFR 1 16(0) (0		NA		<del>  "</del>			RATE	21	EE (S)		RATE	/\$\ /\$\	
SEARCHFEF		-		N/A .			NVA	1	50.00		NA		300.
(37 CFR 1 16(N. (1). or (m)) EXAMINATION FEE		N/A			N/A		NA	S	250		N/A	<u> </u>	
37 CFR 1 18(a), (p), or (q)).		N	NA		N/A		N/A		\$100		·		\$500
37.CFR 1 16(i))		minus 20 =		1.			X\$ 25				· NA		\$200
NOEPENDENT CLAIMS 37 CFR 1 16(h))		minus 3 =		-	drawings average					OR	X\$50	•	
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PPLICATION SIZE	, ,	THE PROPERTY OF LIGHT STATE OF THE PROPERTY OF		MIN SILA	Malian wise Land		-						
07 CFR 1 16(4))		is \$250 (\$125 for small er additional 50 sheets or fro						1	- 1				
		15 U.S.C. 4	1(a)(1)(G) a	ਜaction nd 37 €	thereof. Sec	•		1	• ].			- 1	
ULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(s).						$\dashv \vdash$	+180=	<del>- </del> -		<i>-</i>	·-		
						الد	***************************************			L	+360=		
If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			_	TOTAL	7	
APP	CITADU	N AS AM	ENDED -	PART	H						TOTAL		
	(Colum		•			. *	•				•	•	
T .	CLA	MS		dumn 2)	(Column 3)	) <u>.                                    </u>	SMALL	ENTITY	, (	OR	OTH	ER TI	HAN ,
			NU	GHEST JMBER PRESENT		7 /	RATE (\$)		ADDI- TIONAL		SMAL	LEN	TITY
Total (37 CFR 1.10(n))  Application Size Fee (37 CF		MENT PAID		OUSLY	OUSLY EXTRA						RATE (\$)	1.	ADDI-
				0		1 1:			(S)		<u> </u>		TIONAL FEE (\$)
Independent . D7 CFR 1.10(h)	• ,	Mir	nus •=	3	-	1 H	\$ 25 .		0	, X	\$50	1 -	
Application Size	Fee (37 C	FR 1 16(a)		2_		] [	(100 _		OF	. Ix	200	<b>十</b> 、	· ·
				<u>·</u>					— J "	` <b> </b>		-	+
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)						+	180=	T			360=	┼─	_
						TC	TAL	<del></del>	OR	L	TAL	<b> </b>	
	(Calumn 1	••				AC	OL FEE		OR	AD	D'L FEE		
	CLAIMS	-	· (Colu	mn 2)	(Column 3)	-	· · ·	. •			•		
- 1	REMAININ	16	NUME	BER	PRESENT		ATE (\$)	455					
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Total STOFR.1.18(II)	•	Minus		_	= -	1		FEE (\$)	-1	_			ONAL EE (\$)
		Minus	-		B.	<u> </u>	25 .		OR	XS:	50 -		
ndependent • 37 CFR 1.18(h))		Application Size Fee (37 CFR 1.16(s))							OR	X20	00	:	
37CFR 1.16(h))	00 (37 CFR	1.16(s))				<u> </u>	. 1		]			• •	
upplication Size F			70 m er										
37CFR 1.16(h))			DÉNT CLAIM	(37 CFR 1	.16@)	+1	80=		OR	+3	60=	····	
Application Size F	on of Muli	TIPLE DEPEN				TOT	v	,	7	L		·	
Application Size F	ON OF MULT	TIPLE DEPEN				TOT/			OR	TOTA		······································	

In a righest number Previously Paid For (Iotal or Independent) is the highest number found in the appropriate box in column 1.

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